

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
**Appeal to the Board of Patent Appeal and Interferences**



In re PATENT APPLICATION of:			
Inventor(s):	Joseph MORRIS	Atty. Dkt.:	2655-0008
Appln. No.:	09/682,927	Group Art:	2643
Filing Date:	November 1, 2001	Examiner:	ENG, George
Title of Invention:	SECONDARY SUBSCRIBER LINE OVERRIDE SYSTEM AND METHOD	Date:	September 22, 2005

Hon. Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

1.	<input checked="" type="checkbox"/>	<b>NOTICE OF APPEAL:</b> Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision (not Advisory Action) dated July 12, 2005 of the Examiner twice/finally rejecting claim(s) in this application or in this application and its parent application.
2.	<input type="checkbox"/>	<b>BRIEF</b> on appeal in this application attached in <u>triplicate</u> (extendable up to 5 months).
3.	<input type="checkbox"/>	An <b>ORAL HEARING</b> is respectfully requested under Rule 194 (due two months after Examiner's Answer – <u>unextendable</u> ).
4.	<input type="checkbox"/>	Reply Brief is attached in <u>triplicate</u> (due two months after Examiner's Answer – <u>unextendable</u> ).
5.	<input checked="" type="checkbox"/>	"Small entity" statement filed: <input checked="" type="checkbox"/> herewith <input type="checkbox"/> previously.
6.	<input type="checkbox"/>	Fee <u>NOT</u> required if/since paid in prior appeal in which the Board of Patent Appeals and Interferences did <u>not</u> render a decision on the merits (35 USC 134).

**7. FEE CALCULATION**

If box 1 above is X'd .....	enter	\$500/\$250	\$ 250
If box 2 or 4 above is X'd .....	enter	\$500/\$250	\$
If box 3 above is X'd .....	enter	\$1000/\$500	\$
<b>8. Original Due Date: October 12, 2005</b>			
<b>9. TOTAL FEE TO BE CHARGED:</b>			\$ 250

10. ☒ Check No, 1605 in the amount of \$250 is attached.

10/03/2005 MGE BREM1 00000017 09682927

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CUSTOMER NUMBER

**42624**

Respectfully submitted,

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